



Compliance Instrument
Tracking System Service

#3 Corporate Associations and Structure Form

Print this form (page) using your browser print function. After printing, you should close this window/tab (not your browser) to return to the CITSS application where you can select the print windows for the Account Application Checklist, Account Application with Attestations Form, and the Corporate Associations and Structure Form.

CITSS Entity ID: 123456

Entity Type: Covered Entity, Covered Source, or Opt-in Entity

Legal Name: Company B

Entities registering for CITSS must disclose corporate structure and ownership information. Entities must also disclose corporate associations with other registered and non-registered entities and sufficiently explain these disclosed associations. Section 95833 of the California Cap-and-Trade Regulation provides a description of what constitutes a corporate association. At minimum, Sections 1, 2, 3, and 4 of this form must be completed and must be included in your mail-in account application submission. If you have questions regarding the completion of this form, please visit the website listed or contact the Help Desk at 916-324-7659 or CACITSSHelpDesk@arb.ca.gov for assistance.

Sample completed forms, additional guidance, and electronic versions of this form can be found here:

<http://www.arb.ca.gov/cc/capandtrade/markettrackingsystem/markettrackingsystem.htm>

Section 1.0 Name and Addresses of Your Entity's Directors and Officers

Please check the applicable box below.



1. I am applying for accounts for an organization.



2. I am applying for accounts as an individual account holder or natural person.

If you selected option 1, disclose the names and addresses of your entity's Directors and Officers below. If you selected option 2, you do not need to provide any additional information in this section.

Disclose information regarding your directors and officers. If you need additional space, you may submit multiple pages for this Section.

Director or Officer Information				
#	First Name	Last Name	Title	Mailing Address (Street No, Street Name, City, State/Province, Zip, Country)
1	John	Taylor	Director	123 Mainstreet, AnyTown, CA, 12345, United States
2	Frank	Jones	Assistant Director	123 Mainstreet, AnyTown, CA, 12345, United States
3	Jane	Smith	Chief Financial Officer	123 Mainstreet, AnyTown, CA, 12345, United States

Section 2.0 Names and Address of Persons with Voting Rights

Disclose the names and addresses of all persons controlling over 10% of the voting rights attached to all outstanding voting securities of your entity.

Please select the situation which best describes your entity.

- ☐ 1. I am applying for accounts as an individual account holder or natural person.
- ☐ 2. The entity I represent does not have any persons controlling over 10% of the voting rights attached to the outstanding voting securities.
- ☒ 3. The entity I represent has persons controlling over 10% of the voting rights attached to the outstanding voting securities, and the information I've provided in the rest of this form is a true representation of those persons.

If you selected options 1 or 2 above, please continue to Section 3.0 of this form. If you have selected option 3, complete the table below as applicable.

Names and Address of Persons with Voting Rights				
#	First Name	Last Name	Percentage Of Control	Mailing Address (Street No, Street Name, City, State/Province, Zip, Country)
1	John	Taylor	20%	123 Mainstreet, AnyTown, CA, 12345, United States
2	Mary	Williams	11%	123 Mainstreet, AnyTown, CA, 12345, United States
3	Steve	Moore	17%	123 Mainstreet, AnyTown, CA, 12345, United States
4	Dave	Jones	13%	123 Mainstreet, AnyTown, CA, 12345, United States

Section 3.0 Overview of Your Company's Corporate Associations

Please select the situation which best describes your entity's corporate associations

- ☐ 1. The entity or individual account holder I represent does not have any corporate associations.
- ☐ 2. The entity I represent has corporate associations, none of which must be disclosed under section 95833 of California's Cap-and-Trade Regulation.
- ☒ 3. The entity I represent has corporate associations that are disclosable under section 95833 of California's Cap-and-Trade Regulation, and the information I've provided in the rest of this form is a true representation of those associations.

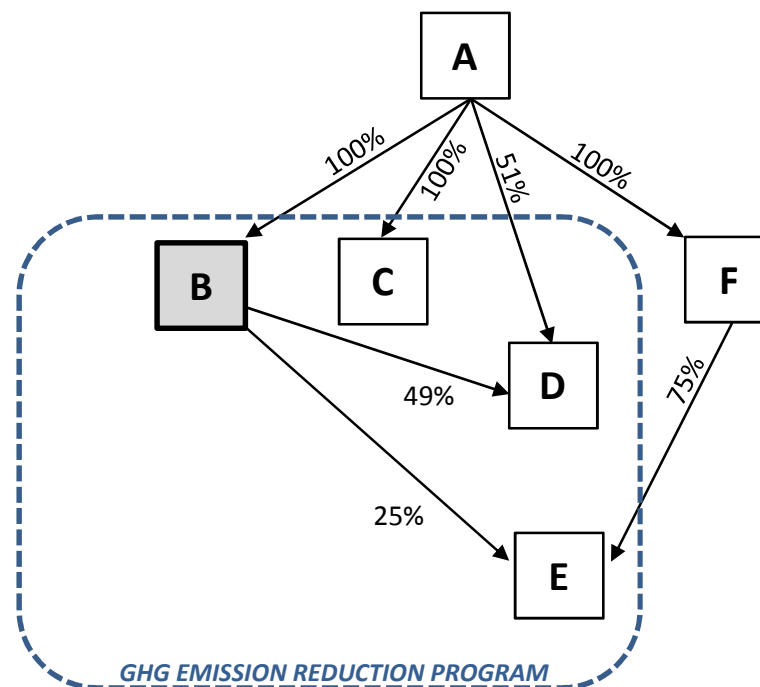
If you have selected either option 1 or 2, please sign Section 4 and return this entire form, the completed Account Application Checklist, and the completed Account Application with Attestations Form to the Jurisdiction Registrar. If you have selected option 3, complete Subsections 3.1, 3.2, and 3.3 and sign Section 4 of this form before submitting the entire form to the Registrar responsible for your account.

Section 3.1 Overview of the Nature of Your Family of Companies/Associations

Please provide a brief overview of the nature of your family of companies/associations in box below and any additional information that describes or explains your corporate associations. You may also provide a chart or pictorial representation of your organization.

Overview of your family of companies/associations

- *Company B is owned by Company A.*
- *Company A owns several other manufacturing firms including Company C and F, and partial ownership of Company D.*
- *Companies B, C, and F are sisters under Company A.*
- *Company D is a sister of Companies C and F, but not of Company B because Company B shares control of Company D with Company A.*
- *Company B shares control of Company E with Company F.*
- *Companies B, C, D, and E are participants in the GHG Emission Reduction Program and are registered in the CITSS.*



Section 3.2 Reporting of Parent and Subsidiary Companies

Disclose information regarding your parent companies, regardless of whether or not they are registered in the CITSS.

- The first entry in the table should be the highest-level company(s) with an ownership interest in your entity. Provide the DUNS number, Federal Tax ID Number (EIN or CRA Business Number), and GHG Reporting ID for each entity, if available.
- If a parent company owns or controls more than one subsidiary company, provide the names of all subsidiary companies that the parent company owns or controls on individual rows.
- If a subsidiary is owned or controlled by more than one parent company, report all parent companies of the jointly owned or controlled subsidiary on individual rows.
- If the parent companies of the jointly owned or controlled subsidiary are also controlled or owned by parent companies, report these parent companies as well.
- "Measure of Control" examples include: ownership of listed shares; ability to appoint common directors; voting power; holding of partnership interest; and other indicia of control.
- "Percentage of Control" is the percentage of ownership or other indicia of control the parent company holds over the subsidiary company.

Reporting of Parent and Subsidiary Companies						
#	Parent Legal Name <i>Provide DUNS ID, Tax ID, and GHG Reporting ID if available</i>	Relationship	Subsidiary Legal Name <i>Provide DUNS ID, Tax ID, & GHG Reporting ID if available</i>	Measure of Control	Percentage of Control	Additional Information Describing Relationship and Measures of Control
1	<i>Company A</i> <i>DUNS: 111111111</i> <i>TAX ID: 11-1111111</i> <i>ARB GHG ID: 111111</i>	parent company of	<i>Company B</i> <i>DUNS: 222222222</i> <i>TAX ID: 22-2222222</i> <i>ARB GHG ID: 2222222</i>	<i>Subsidiary</i>	<i>100%</i>	
2	<i>Company A</i> <i>DUNS: 111111111</i> <i>TAX ID: 11-1111111</i> <i>ARB GHG ID: 111111</i>	parent company of	<i>Company C</i> <i>DUNS: 333333333</i> <i>TAX ID: 33-3333333</i> <i>ARB GHG ID: 3333333</i>	<i>Subsidiary</i>	<i>100%</i>	
3	<i>Company A</i> <i>DUNS: 111111111</i> <i>TAX ID: 11-1111111</i> <i>ARB GHG ID: 111111</i>	parent company of	<i>Company F</i> <i>DUNS: 666666666</i> <i>TAX ID: 66-6666666</i> <i>ARB GHG ID: 6666666</i>	<i>Subsidiary</i>	<i>100%</i>	
4	<i>Company A</i> <i>DUNS: 111111111</i> <i>TAX ID: 11-1111111</i> <i>ARB GHG ID: 111111</i>	parent company of	<i>Company D</i> <i>DUNS: 444444444</i> <i>TAX ID: 44-4444444</i> <i>ARB GHG ID: 4444444</i>	<i>Shares</i>	<i>51%</i>	
5	<i>Company B</i> <i>DUNS: 222222222</i> <i>TAX ID: 22-2222222</i> <i>ARB GHG ID: 2222222</i>	parent company of	<i>Company D</i> <i>DUNS: 444444444</i> <i>TAX ID: 44-4444444</i> <i>ARB GHG ID: 4444444</i>	<i>Shares</i>	<i>49%</i>	
6	<i>Company B</i> <i>DUNS: 222222222</i> <i>TAX ID: 22-2222222</i> <i>ARB GHG ID: 2222222</i>	parent company of	<i>Company E</i> <i>DUNS: 555555555</i> <i>TAX ID: 55-5555555</i> <i>ARB GHG ID: 5555555</i>	<i>Shares</i>	<i>25%</i>	
7	<i>Company F</i> <i>DUNS: 666666666</i> <i>TAX ID: 66-6666666</i> <i>ARB GHG ID: 6666666</i>	parent company of	<i>Company E</i> <i>DUNS: 555555555</i> <i>TAX ID: 55-5555555</i> <i>ARB GHG ID: 5555555</i>	<i>Shares</i>	<i>75%</i>	
		parent company of				

For the purpose of assessing holding limits, disclose your corporate associations to other entities or entities that intend to hold compliance instruments in CITSS. The associations disclosed here should be a subset of the associations disclosed in the Section 3.2. Complete the fields in the table below for each of your corporate associations to other registered CITSS entities.

- [illegible]

Section 4.0 CITSS Primary Account Representative or Alternate Account Representative Signature for Corporate Associations and Structure

Primary Account Representative or Alternate Account Representative Attestation 1. *By signing this attestation, I certify under penalty of perjury under the laws of the State of California that I have personally examined, and am familiar with, the statements and information submitted in this document and all its attachments. Based on my inquiry of those individuals with primary responsibility for obtaining the information, I certify under penalty of perjury under the laws of the State of California that the statements and information submitted to ARB are true, accurate, and complete. I consent to the jurisdiction of California and its courts for purposes of enforcement of the laws, rules, and regulations pertaining to title 17, article 5, sections 95800 et seq., and I am aware that there are significant penalties for submitting false statements and information or omitting required statements and information.*

Print PAR or AAR Name: *Doug Brown*

Date: *June 14, 2012*

Employer Name: *Company B*

Title: *Cap-and-Trade Manager*

PAR or AAR Signature: *Doug Brown*
